



PATENT LAW

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VTN-499

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08/10/2004

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Jacqueline Pindinics

(Depositor's name)

11/8/04

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/540343	03/31/2000	Douglas G. Vanderlan	VTN0410	3140

TITLE OF INVENTION: BIOMEDICAL DEVICES WITH HYDROPHILIC COATINGS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	11/10/2004

EXAMINER	ART UNIT	CLASS-SUB CLASS
CAIN, EDWARD J	1714	523-107000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB-122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB-47, Rev 03-02 (or more recent) attached. Use of a Customer Number is required.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

Recorded: 09/22/1998

Reel/Frame: 9458722

Johnson & Johnson Vision Care, Inc.

Jacksonville, FL

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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